

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

GRANT LALLY FOR CONGRESS, INC.

ADDRESS (number and street)

734 FRANKLIN AVENUE

SUITE 2806

Check if different
than previously
reported. (ACC)

GARDEN CITY

NY

11501

2. FEC IDENTIFICATION NUMBER ▼

C

C00557900

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

06

D D /

05

Y Y Y Y /

2014

through

M M /

06

D D /

30

Y Y Y Y /

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer CHRISTOPHER NOLAN

Signature of Treasurer

CHRISTOPHER NOLAN

[Electronically Filed]

Date

M M /

10

D D /

17

Y Y Y Y /

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 26

Write or Type Committee Name

GRANT LALLY FOR CONGRESS, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	21935.00	74178.57
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	21935.00	74178.57
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	32232.69	56305.51
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	32232.69	56305.51
8. Cash on Hand at Close of Reporting Period (from Line 27)	17873.06	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	1035.83	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 26

Write or Type Committee Name

GRANT LALLY FOR CONGRESS, INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

19825.00

57425.00

(ii) Unitemized.....

2110.00

7719.42

(iii) TOTAL of contributions from individuals ▶

21935.00

65144.42

(b) Political Party Committees.....

0.00

650.00

(c) Other Political Committees (such as PACs).....

0.00

950.00

(d) The Candidate.....

0.00

7434.15

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

21935.00

74178.57

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

21935.00

74178.57

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 26

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	32232.69	56305.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	32232.69	56305.51

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	28170.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	21935.00
25. SUBTOTAL (add Line 23 and Line 24).....	50105.75
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32232.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	17873.06

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

SAVERIO ANGIULI

Mailing Address 29 FOREST DRIVE

City

SANDS POINT

State

NY

Zip Code

11050

FEC ID number of contributing
federal political committee.

C

Name of Employer

ANGIULI AUTO

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.4594

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

LILAAHAR BICAL

Mailing Address 2173 E 73RD STREET

City

BROOKLYN

State

NY

Zip Code

11234

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4528

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

LILAAHAR BICAL

Mailing Address 2173 E 73RD STREET

City

BROOKLYN

State

NY

Zip Code

11234

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4676

Amount of Each Receipt this Period

2400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 6 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

J CHRISTOPHER CALLAGHAN**A.**

Mailing Address 9 6TH STREET

City

WATERFORD

State

NY

Zip Code

12188

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ACCOUNTANT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4530

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MANUS COONEY**B.**

Mailing Address 8801 BEL AIR PLACE

City

POTOMAC

State

MD

Zip Code

20854

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN CONTINENTAL GROUP

Occupation

PARTNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.4551

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MARTIN DEHLER**C.**

Mailing Address 143 ROCKAWAY AVENUE

City

GARDEN CITY

State

NY

Zip Code

11530

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		20		2014

Transaction ID : SA11AI.4592

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

1500.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

GIUELLERMO GOMEZ**A.**

Mailing Address 2310 N ARMENIA AVENUE

City

TAMPA

State

FL

Zip Code

33607

FEC ID number of contributing
federal political committee.

C

Name of Employer

GOMEZ & TOUGHER P.A.

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : SA11AI.4605

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

WILLIAM HETZLER**B.**

Mailing Address 1435 BAY BLVD.

City

ATLANTIC BEACH

State

NY

Zip Code

11509

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

INVESTOR

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

1175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		13		2014

Transaction ID : SA11AI.4567

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

WILLIAM MAHLAN**C.**

Mailing Address 17 HUCKLEBERRY LN

City

OYSTER BAY

State

NY

Zip Code

11771

FEC ID number of contributing
federal political committee.

C

Name of Employer

JONES, HIRSCH CONNORS

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4579

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional).....

1150.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

SOAMNAUTH MISIR**A.**

Mailing Address 129-79TH STREET

City

NORTH BERGEN

State

NJ

Zip Code

07047

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIICHI SANKYO, INC

Occupation

MEDICAL AFFAIRS

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.4584

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

SOAMNAUTH MISIR**B.**

Mailing Address 129-79TH STREET

City

NORTH BERGEN

State

NJ

Zip Code

07047

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIICHI SANKYO, INC

Occupation

MEDICAL AFFAIRS

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.4585

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

JAMES PEARLMAN**C.**Mailing Address 3506 PALM CROSSING DR
301

City

TAMPA

State

FL

Zip Code

33613

FEC ID number of contributing
federal political committee.

C

Name of Employer

FEC FORM SENT INFO REQUESTED

Occupation

INFO REQUESTED

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2014

Transaction ID : SA11AI.4601

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

5300.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

STEVE PHILIPS

Mailing Address 6205 PARKHILL DRIVE

City

ALEXANDRIA

State

VA

Zip Code

22312

FEC ID number of contributing
federal political committee.

C

Name of Employer

DLA PIPER

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		24		2014

Transaction ID : SA11AI.4597

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ALFRED PIRRO

Mailing Address 230 HUNTERS RUN TERRACE

City

BEL AIR

State

MD

Zip Code

21015

FEC ID number of contributing
federal political committee.

C

Name of Employer

PHYSICIAN MANAGEMENT, PA

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		22		2014

Transaction ID : SA11AI.4553

Amount of Each Receipt this Period

2400.00

Full Name (Last, First, Middle Initial)

WILLIAM SALIM Jr.

Mailing Address 867 NE 78TH STREET

City

BOCA RATON

State

FL

Zip Code

33487

FEC ID number of contributing
federal political committee.

C

Name of Employer

MOSKOWITZ, MANDELL, SALIM

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3900.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

JOSEPH SWAMI**A.**

Mailing Address 11520 121ST STREET

City

SOUTH OZONE PARK

State

NY

Zip Code

11420

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRIEDMAN RX PHARMACY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2014

Transaction ID : SA11AI.4599

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

JOHN VAFAI**B.**

Mailing Address 300 EAST 93 STREET

City

NEW YORK

State

NY

Zip Code

10128

FEC ID number of contributing
federal political committee.

C

Name of Employer

LALLY & MISIR, LLP

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2014

Transaction ID : SA11AI.4595

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

VERMONT EQUITIES (FEC Form sent-Info requested)**C.**Mailing Address 2130 WILLIAMSBRIDGE
SUITE 1G

City

BRONX

State

NY

Zip Code

10461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		16		2014

Transaction ID : SA11AI.4526

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

2400.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 26

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

MICHAEL ZUMMO**A.**

Mailing Address 101 ARIZONA AVENUE

City

LONG BEACH

State

NY

Zip Code

11561

FEC ID number of contributing
federal political committee.

C

Name of Employer
LALLY & MISIR, LLPOccupation
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2014

Transaction ID : SA11Al.4554

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

75.00

19825.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 26

☐ 11a ☐ 11b ☐ 11c ☒ 11d ☐ 15
12 13a 13b 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

GRANT M LALLY

A. Mailing Address 3 OAKWOOD DRIVE

City

LLOYD HARBOR

State

NY

Zip Code

11743

FEC ID number of contributing
federal political committee.

C H4NY05056

Name of Employer
LALLY & MISIR, LLP

Occupation
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

18434.15

Date of Receipt

M M / D D / Y Y Y Y
06 20 2014

Transaction ID : SA11D.5197

Amount of Each Receipt this Period

11000.00

In-kind - candidate paid CCC Enterprises

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. A & M SUPPLIES NETWORK INC

Mailing Address P O BOX 141

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

City	State	Zip Code
EAST MEADOW	NY	11554

Amount of Each Disbursement this Period

2805.24

Purpose of Disbursement
YARD SIGNS

006

Transaction ID : SB17.4627

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. ANCONA

Mailing Address 220 OLD COUNTRY ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
MINEOLA	NY	11501

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
RENT

001

Transaction ID : SB17.4657

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. JANNETTE BYRNES

Mailing Address 38 CROFT LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
SMITHTOWN	NY	11787

Amount of Each Disbursement this Period

347.84

Purpose of Disbursement
REIMBURSEMENT

001

Transaction ID : SB17.4651

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....

4153.08

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. COSTCO

Mailing Address 10 GARETT PLACE

City	State	Zip Code
COMMACK	NY	11725

Purpose of Disbursement
REIMBURSE VOLUNTEER EXPENSES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2014

Amount of Each Disbursement this Period

75.94

Transaction ID : SB17.4651.0

[MEMO ITEM]

B. HESS

Full Name (Last, First, Middle Initial)

Mailing Address 522 SMITHTOWN BY PASS

City	State	Zip Code
HAUPAUGUE	NY	11787

Purpose of Disbursement
REIMBURSE VOLUNTEER TRAVEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		19		2014

Amount of Each Disbursement this Period

84.05

Transaction ID : SB17.4651.1

[MEMO ITEM]

C. HESS

Full Name (Last, First, Middle Initial)

Mailing Address 522 SMITHTOWN BY PASS

City	State	Zip Code
HAUPAUGUE	NY	11787

Purpose of Disbursement
REIMBURSE VOLUNTEER TRAVEL

002

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		24		2014

Amount of Each Disbursement this Period

105.01

Transaction ID : SB17.4651.2

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. HESS

Mailing Address 522 SMITHTOWN BY PASS

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2014

City	State	Zip Code
HAUPAUGUE	NY	11787

Amount of Each Disbursement this Period

72.03

Purpose of Disbursement
REIMBURSE VOLUNTEER TRAVEL

002

Transaction ID : SB17.4651.3

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

B. CCC ENTERPRISES

Mailing Address 324 WEST 19TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

City	State	Zip Code
DEER PARK	NY	11729

Amount of Each Disbursement this Period

5472.51

Purpose of Disbursement
DIRECT MAIL SERVICES

006

Transaction ID : SB17.4628

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

C. CCC ENTERPRISES

Mailing Address 324 WEST 19TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2014

City	State	Zip Code
DEER PARK	NY	11729

Amount of Each Disbursement this Period

11226.60

Purpose of Disbursement
DIRECT MAILING SERVICES

006

Transaction ID : SB17.4629

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

16699.11

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. CCC ENTERPRISES

Mailing Address 324 WEST 19TH STREET

City	State	Zip Code
DEER PARK	NY	11729

Purpose of Disbursement
DIRECT MAILING SERVICES

006

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

Amount of Each Disbursement this Period

5954.09

Transaction ID : SB17.4643

B. CCC ENTERPRISES

Mailing Address 324 WEST 19TH STREET

City	State	Zip Code
DEER PARK	NY	11729

Purpose of Disbursement
DIRECT MAILINGCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

Amount of Each Disbursement this Period

11000.00

Transaction ID : SB17.5196

[MEMO ITEM]

C. FACEBOOK

Mailing Address 1601 WILLOW ROAD

City	State	Zip Code
MENLO PARK	CA	94025

Purpose of Disbursement
ADVERTISING

004

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2014

Amount of Each Disbursement this Period

25.18

Transaction ID : SB17.4639

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

5979.27

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB17
Transaction ID : SB17.5196

CANDIDATE PAID CCC ENTERPRISES \$11,0000 USING PERSONAL FUNDS FOR DIRECT MAILING.

Form/Schedule:
Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. FACEBOOK

Mailing Address 1601 WILLOW ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
MENLO PARK	CA	94025

Purpose of Disbursement
ADVERTISING

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

50.14

Transaction ID : SB17.4645

B. FACEBOOK

Full Name (Last, First, Middle Initial)

Mailing Address 1601 WILLOW ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

City	State	Zip Code
MENLO PARK	CA	94025

Purpose of Disbursement
ADVERTISING

004

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.4661

C. GRANT M LALLY

Full Name (Last, First, Middle Initial)

Mailing Address 3 OAKWOOD DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

City	State	Zip Code
LLOYD HARBOR	NY	11743

Purpose of Disbursement
In-kind - candidate paid CCC Enterprises

Candidate Name

Category/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 03

Amount of Each Disbursement this Period

11000.00

Transaction ID : SB17.5198

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

300.14

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. MILLERIDGE INN

Mailing Address 585 NO. BROADWAY

City	State	Zip Code
JERICO	NY	11753

Purpose of Disbursement
FUNDRAISER EVENT

007

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2014

Amount of Each Disbursement this Period

1854.79

Transaction ID : SB17.4619

B. PALADINO PRINTING

Mailing Address 200-09 32ND AVENUE

City	State	Zip Code
BAYSIDE	NY	11361

Purpose of Disbursement
PALM CARDS

006

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

631.48

Transaction ID : SB17.4641

C. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRANSACTION FEE

003

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2014

Amount of Each Disbursement this Period

40.82

Transaction ID : SB17.4621

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2527.09

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

Amount of Each Disbursement this Period

137.40

Transaction ID : SB17.4630

B. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

5.75

Transaction ID : SB17.4632

C. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		17		2014

Amount of Each Disbursement this Period

5.75

Transaction ID : SB17.4637

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

148.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2014

Amount of Each Disbursement this Period

14.38

Transaction ID : SB17.4638

B. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2014

Amount of Each Disbursement this Period

213.25

Transaction ID : SB17.4640

C. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		20		2014

Amount of Each Disbursement this Period

14.38

Transaction ID : SB17.4642

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

242.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

Amount of Each Disbursement this Period

5.75

Transaction ID : SB17.4644

B. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2014

Amount of Each Disbursement this Period

4.31

Transaction ID : SB17.4658

C. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2014

Amount of Each Disbursement this Period

8.63

Transaction ID : SB17.4659

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

18.69

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. RALLY/PIRYXMailing Address 144 2ND STREET
1ST FOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
TRANSACTION FEE

003

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2014

Amount of Each Disbursement this Period

5.75

Transaction ID : SB17.4662

B. SKYLINE CONSULTING

Mailing Address 3050 SKYLINE DRIVE

City SCHENECTADY State NY Zip Code 12306

Purpose of Disbursement
DATA SERVICES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2014

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.4636

C. STAPLES

Mailing Address 1080 OLD COUNTRY ROAD

City WESTBURY State NY Zip Code 11590

Purpose of Disbursement
OFFICE SUPPLIES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2014

Amount of Each Disbursement this Period

104.21

Transaction ID : SB17.4616

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

709.96

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 1080 OLD COUNTRY ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2014

City	State	Zip Code
WESTBURY	NY	11590

Amount of Each Disbursement this Period

54.29

Purpose of Disbursement
OFFICE SUPPLIES

001

Transaction ID : SB17.4631

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. STAPLES

Mailing Address 1080 OLD COUNTRY ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
WESTBURY	NY	11590

Amount of Each Disbursement this Period

106.96

Purpose of Disbursement
OFFICE SUPPLIES

001

Transaction ID : SB17.4649

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. STAPLES

Mailing Address 1080 OLD COUNTRY ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2014

City	State	Zip Code
WESTBURY	NY	11590

Amount of Each Disbursement this Period

642.20

Purpose of Disbursement
OFFICE EQUIPMENT

001

Transaction ID : SB17.4650

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

803.45

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

Full Name (Last, First, Middle Initial)

A. STAPLES

Mailing Address 1080 OLD COUNTRY ROAD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2014

City	State	Zip Code
WESTBURY	NY	11590

Amount of Each Disbursement this Period

Purpose of Disbursement
OFFICE SUPPLIES

001

320.07

Candidate Name

Category/
Type

Transaction ID : SB17.4664

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	House	Disbursement For:
	Senate	
	President	
		<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

320.07

31901.77

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 26 OF 26

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

GRANT LALLY FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BERKE / FARAH, LLP

Nature of Debt (Purpose):

FEES FOR LEGAL SERVICESMailing Address 2101 L STREET
SUITE 1000City State Zip Code
WASHINGTON DC 20087

Outstanding Balance Beginning This Period

1000.00

Transaction ID : SD10.5189

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BERKE / FARAH, LLP

Nature of Debt (Purpose):

LEGAL SERVICES EXPENSESMailing Address 2101 L STREET
SUITE 1000City State Zip Code
WASHINGTON DC 20087

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5191

Amount Incurred This Period

16.97

Payment This Period

0.00

Outstanding Balance at Close of This Period

16.97

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

BERKE / FARAH, LLP

Nature of Debt (Purpose):

LEGAL SERVICES EXPENSESMailing Address 2101 L STREET
SUITE 1000City State Zip Code
WASHINGTON DC 20087

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5192

Amount Incurred This Period

18.86

Payment This Period

0.00

Outstanding Balance at Close of This Period

18.86

1) **SUBTOTALS** This Period This Page (optional) ▶

1035.83

2) **TOTALS** This Period (last page this line number only) ▶

1035.83

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1035.83